FORM 93A

Rule 93.02

**IN THE SUPREME COURT\***

**IN THE COURT OF APPEAL\***

**IN THE COURT OF CRIMINAL APPEAL\* OF THE NORTHERN TERRITORY**

**OF AUSTRALIA**

**AT Darwin Alice Springs**

**No.**

BETWEEN

THE QUEEN

And

DEFENDANT

APPLICATION FOR BAIL / REQUEST FOR REVIEW OF BAIL DECISION\*

*Name in full of applicant/ person requesting review\** of *address* is *charged with\*/has*

*been convicted of\* enter description of offence*

I, *Name in full of applicant/ person requesting review\** of *address* request *Name of* *Court* at *Place*

to –

(a) grant bail

Application for bail made at ....…...... *Place* on the *date* day of *Month, Year*; or

(b) review under *cite provision of Bail Act under which review is sought* a decision of *name of magistrate/Judge/court* made at *court, place* on *date of decision*.

Application/ request for review made on the *date* day of *Month, Year*\*

*Signature of applicant / person making request*

NOTICE OF HEARING

TO: The accused person\*Director of Public Prosecutions\*

NOTE: That the above matter has been listed for hearing at Name of Court

on ......................... the ..........day of .......................... 20.... at.............am/pm\*

when all parties to the matter must attend.

Date:

COURT OFFICER

*\*Delete where inapplicable*

**IN THE SUPREME COURT**

**IN THE COURT OF APPEAL**

**IN THE COURT OF CRIMINAL APPEAL OF THE NORTHERN TERRITORY**

**OF AUSTRALIA**

**AT DarwinAlice Springs**

**No.**

BETWEEN:

**THE QUEEN**

and:

**DEFEDANT'S NAME**

**APPLICATION FOR BAIL\***

**REQUEST FOR REVIEW OF \* BAIL DECISION\***

**IN THE SUPREME COURT\***

**IN THE COURT OF APPEAL\***

**IN THE COURT OF CRIMINAL APPEAL\* OF THE NORTHERN TERRITORY**

**OF AUSTRALIA**

**AT Darwin Alice Springs**

**No.**

BETWEEN

**THE QUEEN**

­v­

**AFFIDAVIT IN SUPPORT OF APPLICATION FOR BAIL REVIEW**

I, *……………………………………….…* of

…………………………………………………………….

MAKE OATH AND SAY as follows:

day of *……………………………* 200

Witness .........................................

2

DATED this

Deponent:.......................................................

SWORN/AFFIRMED by the Deponent )

at DARWIN this day of *………………...* )

20

Before me:.....................................................

This affidavit was filed by *……………………………………………*

of *……………………………………………………………………….*

......................................................